

SPECIMEN APPLICATION FORM

(FOR OFFICE USE ONLY)

OPEN COMPETITIVE EXAMINATION FOR RECRUITMENT TO THE POST OF SUPERVISORY MANAGEMENT ASSISTANT - TECHNICAL  
SERVICE CATEGORY OF THE DEPARTMENT OF LABOUR- 2021

01. Language medium in which you sit for the examination:

Sinhala - 1

Tamil - 2  (Write the relevant number in the box)

English - 3

(Application form should be filled in the language medium in which you wish to sit for the examination)

02. 2.1. Name with initials at the end of the name: .....

(In English capital letters) Eg: (SILVA A.B.D.P.A)

2.2. Name in Full (In English Capital Letters):.....

2.3. Name in Full (In Sinhala / Tamil): .....

03. 3.1. Permanent Address:.....

(In English capital letters) (Admission card will be posted to this address)

3.2. Permanent Address: (In Sinhala /Tamil) : .....

04. Gender : (Male -0, Female -1)  (Write the relevant number in the box)

05. NIC No. :

06. Civil Status: (Unmarried - 1, Married -2)  Write the relevant number in the box

07. 7.1. Date of Birth : Year :  Month :  Date :

7.2. Age as at 13.08.2021 : Years :  Months :  Days :   
(the closing date of application)

08. Telephone Number :

09. The post applied for (Put mark ✓ in the relevant cage) :

<i>Number</i>	<i>Post</i>	
1	Fingerprint Inspection Officer	
2	Research Assistant	
3	Building Inspector	
4	Draughtsman	
5	Technical Officer ( Civil)	
6	Technical Officer (Electrical)	

10. Grade applied for according to paragraph 3.0 of the *Gazette* Notification. (Put ✓ in the relevant cage) :

1	Training Grade (two years training period)	
2	Training Grade (one year training period)	
3	Grade III (direct recruitment)	

11. Educational qualifications:

11.1 G.C.E. (O/L) Examination: (First Attempt)

(i) Year & month of the examination: .....

(ii) Index number:.....

(iii) Results:

	<i>Subject</i>	<i>Grade</i>		<i>Subject</i>	<i>Grade</i>
1			6		
2			7		
3			8		
4			9		
5			10		

11.2 G.C.E. (O/L) Examination: (Second Attempt)

(i) Year & month of the examination: .....

(ii) Index number:.....

(iii) Results:

	<i>Subject</i>	<i>Grade</i>		<i>Subject</i>	<i>Grade</i>
1			6		
2			7		
3			8		
4			9		
5			10		

11.3 G.C.E. (A/L) Examination

(i) Year & month of the examination: .....

(ii) Index number:.....

(iii) Results:

	<i>Subject</i>	<i>Grade</i>
1		
2		
3		
4		

12. Professional Qualifications:

<i>The course followed</i>	<i>Certificate awarding Institution</i>	<i>Duration of the course</i>	<i>Certificate Number and valid date</i>

13. Have you ever been convicted in a Court of Law for a criminal offence ? :.....  
If so, please state particulars:.....

14. Have you previously been in Public Service and been terminated ? .....  
If so, please state the details and reason for termination: .....

15. Payment of examination fee:-

15.1 Amount paid:.....

15.2 Bank branch to which the examination fee was paid: .....

15.3 Date of payment: .....

Paste the bank slip here firmly by one order of it.  
(Keeping a photocopy of the bank slip will be useful)

16. Certificate of the Applicant:

I..... , do here by declare that I am qualified to sit for the Open Competitive Examination as per all the rules and regulations stated in the *Gazette* Notification and that the information given in this application form are true to the best of my knowledge. Further, I agree to act according to the rules & regulations governing the examination and agree to the cancellation of my candidature prior to, during or after the examination, without the payment of any compensation whatsoever, if it is found that I am ineligible as per the Scheme of Recruitment which includes the Provisions of this examination. Moreover, I declare that I shall be subject to the rules and regulations imposed by the Commissioner General of Labour in respect of the conduct of the examination and issue of results and also agree to perform the duties in any part of the Island, if I am selected to this post.

Date :.....

.....,  
Signature of the Applicant.

17. Attestation of the signature of the applicant (should be as per paragraph 11.8 of the *Gazette* Notification) :

I hereby certify that Mr./ Mrs./ Miss..... (Full name of the applicant) who submits this application form is known to me personally and that he/ she has paid the prescribed examination fee and has affixed the relevant bank slip herein. The applicant placed his/ her signature before me on .....

Date : .....

.....,  
(Signature of the officer attesting the signature)

Full name of the officer attesting the signature :

Designation : .....

Address : .....

(Should be certified by placing the official stamp)